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ANNUAL REPORT

OF THE

Director, Medical and Health Department, for 1901.

I.—STATISTICS OF POPULATION.

The population of the Island on the 31st December last was 375,686 according to the statement kindly supplied to me by the Registrar General. The figures in this return differ to some extent from those of the estimated population of the previous year, but are based, I understand, on the information obtained at the Census taken in April 1901.

The increase in the population is small and is entirely due, it will be noticed, to an excess of immigrants over emigrants, for the deaths have exceeded the births in the Colony by 2061 during last year.

It will also be observed that, comparing with the figures of the previous year, 1,580 births less and 1,280 deaths more were registered in 1901.

This unsatisfactory state of things has already occurred in the general population in 1900, but the Indian population has been similarly affected last year.

The birth-rate which has been 39.4 in 1899, and 37.8 in 1900 has fallen to 34.3 per 1,000 per annum in 1901. This decrease is more marked in the Indian population as compared with the general population, the respective rates being 34.4 and 35.3.

The death-rate has been higher than that of the preceding year as might have been expected from the foregoing remarks. It was 39.8 in 1901 against 35.7 in 1900, and the mortality has been greater in the general population than among the Indians, the rate having reached 42.6 in the former and 39.3 among the latter. This fact is the more striking as the deaths from plague were more numerous among the Indians, 519 fatal cases having occurred among them, while only 248 deaths were registered in the general population, and 38 among the Chinese.

It should be stated that the classification of the population in the three classes borne in the statistical table under reference becomes more and more difficult every year as the offspring of purely Asiatic parents who grow to manhood in Mauritius not only adopt the customs and manners of the old Creole population, which forms the bulk of what is denominated the general population, but besides, frequently change their Asiatic subnames for christian names.

II.—PREVALENCE OF SICKNESS.

The year under review has been a very unhealthy one throughout when compared with previous ones. The sharp fall in the sick returns which is generally well marked in September, and the comparatively fair sanitary condition which is generally observed during the last quarter of the year was not well defined in 1901.

The annual recrudescence of *Malaria* occurred early in March and the epidemic was more severe than is customary during the following two months.

The number of patients admitted in the various hospitals for that complaint in 1901 was over 4,000 which represents an excess of 1334 over that of the preceding year.

The classification of the different types of malarial fever is not yet as accurate as is desirable but it shows an improvement on that of the previous years and the subject will continue to receive due attention.

The case mortality of intermittent fever treated in hospital in 1901 has been 1.23 o[o, and this low mortality seems to be due to a less virulent type of disease. Malaria has apparently been becoming more amenable to a judicious use of quinine during the last few years, but the high death-rate among the patients recorded as having suffered from remittent and pernicious fever shows what danger may result from the neglect of febrile disorders which at first may appear to be only slight ailments. Without going further into the matter, on this occasion, it is worth recording that hœmoglobinuric fever, which is not unfrequently met with by medical practitioners among patients of the better classes, especially in May and June, at the close of the malarial season, is hardly ever noted in the returns of the hospitals.

It will be noticed that a change has been made in the classification of chronic malaria. Cases of that disease characterized by enlargement of the spleen have been inscribed under that heading in the section of diseases of the lymphatic system instead of being reported as malarial cachexia.

Dysentery.—Which is habitually prevalent at the same time as malaria and in the same localities in this Colony prevailed to a greater extent last year than in 1900. But while the number of cases admitted, 799, is much higher than that recorded in 1900, it is satisfactory to note that the case mortality in hospital, 17.6 o/o, was 4.9 less than that of the former year. The excellent effect of the saline treatment at the Port Louis Prisons, and the care bestowed on the sick in that prison hospital have been proved again this year by no death having taken place among 70 patients treated.

Enteric Fever.—There were 14 cases of that disease admitted in the hospitals in 1901. The number is 4 less than that of the previous year, but the improvement indicated by these figures is only accidental. There is no doubt that the disease is spreading in Mauritius as stated in my report on the Sanitary Branch.

Plague.—Seventy five patients were detected suffering from plague in the public hospitals and whenever possible were, without delay, removed to the special lazarets. With the exception of one case at the Lunatic Asylum, which ultimately recovered, and as to the real nature of which medical opinion was divided, no patient contracted the disease in any of the institutions, though it existed in their vicinity in Port Louis, Beau Bassin and Flacq. There were 1,093 cases of plague detected in the Island last year, the highest case mortality 86.4 was observed among the Chinese. Details of the epidemic will form the subject of a special report.

Tubercle.—All diseases of tubercular origin have been classified under this heading in this report. This fact, as well as the greater attention given to the diagnosis of early or ill defined cases of that complaint, may partly account for the increase in the admissions when the figures of last year are compared with those of the previous year. The general impression, which I am inclined to share, is that phthisis is on the increase in the Island

Influenza and diseases of the respiratory organs have been very common in 1901 and it can be easily understood that the germs of tuberculosis have found favorable conditions for spread under these circumstances, and in presence of the great proverty which exists and the defective sanitary conditions under which a large part of the population lives.

Influenza.—This insidious complaint, which recurs annually, has been the cause of 1,300 admissions last year against 471 in 1900. The case mortality has however, increased from 3.06 o[o to 3.66 o[o only, but the foundation laid for other diseases in many of those who have been attacked by influenza should not be overlooked in estimating the harm done by that disease.

Pneumonia.—In support, to some extent, of the above remarks, it may be observed that pneumonia was answerable for 349 admissions in 1901 against 261 in 1900 but though the incidence of the disease has been greater, it is gratifying to note that its virulence has been less. The case mortality was 33.3 in 1901 against 38.2 in the previous year.

Nephritis.—This disease has been steadily increasing for some years. The careful and systematic examination of urine, which is now a general practice, has brought to light many cases of formerly unsuspected renal diseases. But, apart from the increase due to a better diagnosis, there can be no doubt that Bright's disease has of late years become much more common in the Island. It has been suggested that the cause might be a modified form of scarlet fever. But the existence of that disease, in Mauritius, except in a sporadic form and at rare intervals, has not been established by a recent enquiry. Cases of a mild form of measles, or röthen, occasionally assuming the character of what has been described as the fourth disease, have been reported by several medical men, but no connexion appears to exist between that exanthematus fever and the prevalence of nephritis. Malarial infection may have been the cause of a few cases as has been observed from time to time since the epidemic of 1867 ; but it is not likely that an increase in kidney disease should take place from the effects of malaria at a time when that complaint itself appears to be less virulent than formerly. Influenza is blamed by a number of medical practitioners as the agency probably at work in many of these cases as already referred to in a previous annual report. Considering that the various forms of Bright's disease have been more frequently met with since the outbreak of influenza, in an epidemic form, in 1891, this opinion must carry much weight. But however that may be, the question of the increase of renal disease in the Island and its causation offers a large field open to diligent research.

In my last report, some remarks were made on the occurrence of Beri Beri, Leprosy, Cerebro-spinal Meningitis, &c. Nothing more need be written, on this occasion, as far as Mauritius is concerned, in respect of these diseases, but mention should be made of the epidemic of Beri Beri which has taken place at Diego Garcia in 1900 and 1901. Dr. Bolton who was sent to investigate the outbreak in that Island has, in an instructive report, recently printed, confirmed the opinion which had already been expressed by some observers that Beri Beri may be infectious under certain as yet ill defined conditions. The admissions into Hospitals during the year 1901 amounted to 18,542, or 3,093 more than in the previous year. There were 1,313 deaths, exclusive of still births against 1,152 in 1900, and the case mortality, on the total treated, was 6.9 o/o or 0.17 less than that of the preceding year.

With reference to the diseases of the nervous system, it should be mentioned that the sick treated at the Lunatic Asylum infirmaries have been included as formerly in this general return of diseases, but that the admissions into the Lunatic Asylum during 1901, as well as the remaining at the end of 1900, have been classified separately in a tabular statement which will be found at the end of the return. A separate table has similarly been compiled to indicate the number and nature of the operations performed.

The number of attendances at the Public Dispensaries in 1901 reached 62,680 showing an increase of 4,328 on the number of the previous year and giving an additional proof of the unhealthiness of the year.

III.—RELATIVE MORTALITY IN THE DIFFERENT SEASONS.

The months of March, April and May were as usual those during which the greatest mortality took place.

Malarial fever had caused 424 admissions and five deaths in the various hospitals in February. In the month of March the admissions for that disease rose to 1146 and the deaths to 9. In April though the admission numbered 1039 only, 17 deaths took place. In May, the figures for admissions and deaths fell to 708 and 11 respectively and then an improvement began and was more marked as the winter advanced.

Diarrhoea occurred also from March to May when it abated, while dysentery which had begun at the same time continued to prevail till July.

The advent of the cold weather and the fresh winds of July started a recrudescence of influenza and of diseases of the respiratory organs, and the number of deaths from these diseases was particularly high in August, September and October were marked by a rapid rise in the mortality from plague. The deaths from that epidemic reached their maximum (311 fatal cases) in November, and a rapid decline occurred towards the close of the year.

IV.—METEOROLOGICAL CONDITIONS OF THE SEASONS AND THEIR PROBABLE EFFECTS WITH REGARD TO SICKNESS.

The unhealthy season in Mauritius extends from January to May, the worst months being the last three of that period. The rainy season begins in January, and heavy showers are frequent in February and still more so in March. It is the time at which Malaria prevails, for not only is the season favorable for the breeding of mosquitoes, but the nervous system is depressed by an oppressive atmosphere, and the organism is frequently exposed to chills in the evenings, when an attempt is made to get a refreshing rest after a hard day's work.

This influence of the season on the spread of malaria was particularly well examplified by the epidemic of malaria which visited the District of Moka during the first part of 1901. This District had, until that time, been considered a healthy one, but it suffered from fever at the same time that an invasion of mosquitoes took place there last year.

Diarrhœa and Dysentery are also very prevalent from March to May when the water courses which are unfortunately the source from which the majority of the population get their water supply, are polluted in an extensive scale by the surface washings produced by the heavy rains. Besides sewage and dirt of all kind from the villages situated on their banks, the rivers of Mauritius receive a certain quantity of the manure used to fertilize the cane fields through which they run whenever there is a heavy shower.

That season of the year is also the one when mangoes and other tropical fruits are plentiful, and the large consumption of imperfectly matured, decayed, and artificially ripened fruits is a not infrequent cause of disorders of the digestive system.

V.—RECURRENCE OF PARTICULAR DISEASES DURING THE YEAR 1901.

A reference has already been made to these diseases in the foregoing pages, and it will be sufficient to name Malaria, Dysentery, Influenza and Plague as those which deserve notice under this heading.

No connexion has been found to exist between the recurrence of plague and meteorological or other conditions. Besides human agency, which has but too often been made use of to evade Sanitary measures and has thus indirectly contributed to the spread of this disease, the principal if not the only agent in the diffusion of the epidemic appears to be the rat.

VI.—GENERAL SANITARY CONDITION OF THE COLONY.

The year has been a bad one from the sanitary point of view as has already been remarked. Much of what has already been written in my annual report for 1900 could be reproduced almost verbatim to describe the sanitary condition of Port Louis and of the townships and villages in the Colony. These questions will be more fully dealt with in the report on the Sanitary Branch of the Department, and I shall only record here that with the exception of the few localities provided with Mare aux Vacoas water, the water supply, scavengering and night soil service all leave room for much improvement. The rainfall during the past year having been well distributed throughout, and certain ameliorations having been effected at the water works and filters, the Mare aux Vacoas water has given entire satisfaction in 1901, but it is unfortunate that its use is so limited. Actual overcrowding of premises is rare in Mauritius, but conditions similar to those produced by the congregation of too many individuals in a confined space are far from infrequent owing to the occupation by human beings of miserable hovels, which are badly lighted, hardly ventilated and which provide an insufficient cubic space for a dwelling. Huts of this description may be seen at Roche Bois particularly and are the more striking there as many consist of pieces of old tin boxes joined together and supported by old pieces of wood over low dry stone walls.

VII.—VACCINATION.

The population of Mauritius is fairly well protected by vaccination against small pox.

It is probable that revaccination will be provided for this year, and, when that measure will have become an accomplished fact, it will be possible to dispense with the quarantine against small pox. The protection afforded by revaccination was resorted to in August last when two cases of small pox were discovered on board a steamer in Port Louis Harbour, but the operation was restricted to a few persons as the timely measures of precaution adopted fortunately prevented the spread of the disease.

It is a pleasure for me to record that the glycerinated calf lymph which has been in use for years, and about which complaints were made in 1900, has generally given satisfaction last year. There were 10,899 children under 10 months vaccinated in 1901 against 9,967 in 1900 at the public vaccination stations only.

Considering that a fair number of infants are vaccinated besides by private medical attendants, the number of those who escape vaccination must be very small.

VIII—PUBLIC HOSPITALS & DISPENSARIES.

The number of hospitals and dispensaries has been the same in 1901 as during the previous year.

The Hospital of Montagne Longue was almost completed last year and will shortly be opened for the reception of patients.

A final decision has not yet been arrived at as regards the Port Louis Hospital which is still located in the Royal College premises so that many desirable modifications and improvements have not been carried out. Important additions have however been made to the bacteriological laboratory and to the operation room which have proved very useful.

Without entering into the details of the minor works and alterations performed by the Public Works Department in the various Hospitals, it should be stated that a proper contagious disease ward has been erected at Moka Hospital, and that an additional female ward, designed in accordance with modern requirements, has been built at Flacq Hospital. This new ward forms a striking contrast with the old temporary building used as the principal male ward, and it is to be hoped that this structure, and similar ones at Savane and at Moka, may be replaced at no distant date by better constructions.

IX.—DEPARTMENTAL.

This retrospective view of the work done during the past year would be incomplete, were I to omit to mention what has been unfortunately left undone.

The severe and unprecedented outbreak of plague in 1901 taxed the energy of every member of this Department to its utmost. Had it not been for the energy and willing cooperation of my Officers, serious fears might have been entertained of our breaking down altogether under the strain.

The attention of every member of the Head Quarter Staff was directed towards coping with the work entailed by this outbreak and the Assistant Sanitary Warden had to be specially detailed to act as Plague Authority.

As a consequence little attention could be paid to the general sanitation of the Colony, which, I regret to have to repeat, is anything but satisfactory. The consideration of many important questions had to be unavoidably deferred, while even the routine work of the Department has sadly fallen into arrears. Unless substantial assistance be available, I am afraid that we shall come to a deadlock if plague work should again make serious calls upon our time.

The experience thus gained points to the fact that the Medical and Health Department as at present constituted is undermanned and inadequate to cope with the work which devolves upon it even in ordinary times, and much more so when contingencies arise, such as outbreaks of contagious diseases.

I regret to have to record the death of two of our Government Medical Officers : Dr. Desenne and Dr. H. de Chapuiset Lemerle. The former who was an able and experienced practitioner, had been for a long number of years the Public Vaccinator for the District of Savane, and the latter, a young and promising practitioner, was the Government Medical Officer for the same district. Government has, through their death, been deprived of two meritorious Public Officers.

With the exception of the temporary employment of additional Medical Practitioners to meet the plague outbreak the staff of the Department has remained unaltered.

Dr. CHASTELLIER,

Director,
Medical and Health Department.

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RETURN OF THE STATISTICS OF POPULATION FOR THE YEAR 1901.

	Europeans, Whites, Mixed and Coloured.	Africans.	Indians.	Chinese.	
Number of Inhabitants on 31st Dec. 1900.	108,511	432	260,551	3,509	373,003
„ Births during the year 1901.	3,815	...	9,095	...	12,910
„ Deaths „ „ 1901.	4,605	...	10,366	...	14,971
„ Immigrants „ 1901.	1,445	...	6,197	986	8,628
„ Emigrants „ 1901.	1,166	...	1,694	1,024	3,884
Number of Inhabitants in 1901	108,000	432	263,783	3,471	375,686
Increase or	......	...	3,232	...	2,683
Decrease	511	...	......	38	......

METEOROLOGICAL RETURN FOR THE YEAR 1901.

Observations made at the Royal Alfred Obervatory, 180 feet above sea-level.

	TEMPERATURE.						RAINFALL.		WINDS.		REMARKS.
	Solar Maximum.	Minimum on Grass.	Shade Maximum.	Shade Minimum.	Range.	Mean.	Amount in Inches.	Degree of Humidity.	General Direction.	Average Force.	
										Miles per hour.	
January ...	*154.6	*65.1	*95.0	68.3	26.7	†79.4	18.60	†74.8	N.E.S.E. by E.	14.2	Three cyclones in this month in the S. Indian Ocean.
February . .	156.4	57.0	89.3	61.0	28.3	77.4	3.67	80.3	S.E. by E. to E. by N.	7.2	
March ...	156.4	62.2	90.2	67.8	22.4	78.1	9.68	82.0	E. by N. to S.E.	7.6	
April ...	150.5	54.4	89.4	58.3	31.1	75.5	3.43	79.4	S.E. by E. and E.S.E.	9.4	
May ...	143.9	54.1	87.9	60.7	27.2	74.1	2.45	75.7	S.E. by E. to E. by S.	11.9	Total eclipse of the sun on May 18, visible at Mauritius.
June ...	138.7	49.4	83.9	55.3	28.6	69.2	1.39	75.6	S.E. to E. S.E.	11.3	
July... ...	135.8	48.0	82.0	53.3	28.7	69.0	1.91	77.6	E. S. E.	11.3	
August ...	140.6	47.5	80.7	53.0	27.7	68.0	2.47	74.1	E. S. E.	12.1	
September	153.8	48.0	84.6	52.5	32.1	68.6	0.92	72.0	E. by S. to S.E. by E.	12.1	
October ...	152.7	50.2	88.9	56.3	32.6	73.4	0.79	72.0	E. by N. to S.E. by E.	11.6	
November..	158.2	55.7	90.2	60.0	30.2	75.5	5.06	73.5	E. by N. to S.E. by E.	9.8	
December. .	154.6	62.0	89.6	64.7	24.9	77.5	6.10	78.7	E. by N. to E.S.E.	11.6	One cyclone in this month in the S. Indian Ocean.
Means ...	149.7	54.5	87.6	59.3	28.4	73.8	56.47	76.3	E. by S. ½ S.	10.8	

* Absolute values. † Mean of 6th and 15th.

RETURN OF DISEASES AND DEATHS IN 1901.

	Diseases.		Remaining at end of 1900.	Yearly Total.		Total Cases treated.	Remaining at end of 1901.
				Admissions.	Deaths.		
General Diseases.	Small Pox ...	... ...	......	......	......	......	...
	Measles ...	... ...	......	12	......	12	...
	Typhus ...	... ...	......	......	......	......	...
	Dengue ...	... ...	......	......	......	......	...
	Cholera ...	... ...	......	......	......	......	...
	Yellow Fever	... ...	......	......	......	......	...
	Beriberi ...	... ...	......	2	1	2	...
	Yaws ...	... ...	......	......	......	......	...
	Influenza ...	... ...	10	1300	48	1310	4
	Diphtheria ...	... ...	......	4	2	4	...
	Febricula ...	... ...	......	13	1	13	...
	Enteric Fever	... ...	1	14	4	15	1
	Dysentery ...	... ...	13	799	143	812	16
	Plague ...	... ...	......	75	26	75	...
	Malarial Fever	... ...	......	......	......	......	...
	(a.) Intermittent.	Quotidian ...	42	2591	34	2633	17
		Tertian... ...	3	126	2	129	...
		Quartan ...	4	30	......	34	...
		Irregular ...	5	95	......	100	1
		Type undiagnosed	16	1152	14	1168	8
	(b) Remittent	... ...	5	163	7	168	1
	(c) Pernicious	... ...	1	25	13	26	...
	Erysipelas ...	... ...	6	45	6	51	...
	Pyæmia ...	... ...	......	2	2	2	...
	Septicæmia ...	... ...	......	9	8	9	...
	Tetanus ...	... ...	......	11	4	11	...
	Tubercle ...	... ...	46	905	248	951	24
	Gonorrhœa ...	... ...	6	190	......	196	3
	Hydrophobia	... ...	......	......	......	......	...
	Scurvy ...	... ...	......	2	......	2	...
	Parotitis ...	... ...	1	6	......	7	...
	Pertussis ...	... ...	......	3	......	3	...
	Rheumatic fever	... ...	......	5	......	5	...
	Rheumatism	... ...	23	551	......	574	10
	Gout... ...	... ...	......	1	......	1	...
	Leprosy ...	... ...	......	......	......	......	...
	(a) Tubercular	... ...	......	7	......	7	...
	(b) Anæsthetic	... ...	......	9	......	9	...
	Carried over ...	...	182	8147	563	8329	85

RETURN OF DISEASES AND DEATHS IN 1901.

			Diseases.	Remaining at end of 1900.	Yearly Total.		Total cases Treated.	Remaining at end of 1901.
					Admissions.	Deaths.		
			Brought forward...	182	8147	563	8329	85
GENERAL DISEASES			Syphilis	......	......	......	......	...
			(a) Inherited	......	7	......	7	...
			(b) Primary	7	130	......	137	9
			(c) Secundary	8	104	1	112	4
			(d) Tertiary	8	86	5	94	3
			Alcoholism	......	19	4	19	...
			Delirium Tremens	......	5	......	5	...
			Anœmia	5	462	41	467	15
			Debility	23	666	97	689	16
			Diabetes Mellitus	......	18	......	18	1
			Diabetes Insipidus	......	......	......	......	...
			New Growth	......	......	......	......	...
			(a) Non Malignant	1	48	......	49	...
			(b) Malignant	2	60	18	62	2
	OTHER DISEASES.		Senile Decay	......	96	6	96	...
			Athrepsia	......	13	9	13	1
			Cerebro Spinal Meningitis	......	2	2	2	...
			Rachitis	......	1	1	1	...
			Scrofulosis	......	4	......	4	...
			Varicella	......	5	......	5	...
LOCAL DISEASES	NERVOUS SYSTEM	Section 1	Neuritis	......	2	......	2	...
			Meningitis	......	11	11	11	...
			Myelitis	1	31	4	32	2
			Hydrocephalus	......	2	1	2	...
			Encephalitis	......	1	......	1	...
			Congestion of Brain	......	6	5	6	1
			Abscess of Brain...	......	......	......	......	...
			Cerebral Hœmorrhage	1	27	16	28	1
		Section 2	Paralysis	4	91	9	95	4
			Epilepsy	10	100	9	110	3
			Chorea	......	1	1	1	...
			Neuralgia	6	126	......	132	4
			Hysteria	......	21	1	21	1
		Section 3	Idiocy	......	8	......	8	...
			Mania	1	26	......	27	2
			Melancholia	......	......	......	......	...
			Dementia...	......	6	......	6	...
			Delusional Insanity	......	12	......	12	1
			General Paralysis	......	......	......	......	...
			Carried over ...	259	10,344	804	10,603	155

RETURN OF DISEASES AND DEATHS IN 1901.

	Diseases.	Remaining at end of 1900.	Yearly Total.		Total cases Treated.	Remaining at end of 1901.
			Admissions.	Deaths.		
	Brought forward	259	10,344	804	10,603	155
LOCAL DISEASES. Other diseases	Softening of Brain ...	1	15	9	16	2
	Torticollis	......	2	......	2	...
	Eclampsia	......	5	3	5	...
	Vertigo	......	1	......	1	...
	Neurasthenia	6	......	......	6	...
	Sciatica	......	1	......	1	...
	Diseases of the Eye :—					
	Conjunctivitis	2	63	......	65	1
	Keratitis	1	37	......	38	1
	Iritis	......	21	......	21	1
	Retinitis	1	4	......	5	...
	Cataract	12	103	......	115	4
	Ophthalmia Tarsi	1	25	......	26	...
Other Diseases	Nyctalopia	......	3	......	3	1
	Glaucoma	......	1	......	1	...
	Dacryo Cystitis	......	1	......	1	...
	Staphyloma	3	4	......	7	...
	Hordeolus	......	2	......	2	...
	Atrophy of optic nerve... ...	......	1	......	1	...
	Irido Choroïditis	......	1	......	1	...
LOCAL DISEASES.	Diseases of the Ear	......	......	......	......	...
	Otitis	1	55	......	56	1
	Necrosis	......	......	......	......	
	Abscess	......	2	......	2	...
					......	...
	Diseases of the Nose	......	......	......	......	...
	Epistaxis	......	......	......	......	...
	Rhinitis	......	4	......	4	...
	Ôzoena	......	2	......	2	...
	Circulatory System	......	......	......	......	...
	Pericarditis	......	4	......	4	...
	Hypertrophia Cordis ...	......	4	......	4	...
	Valvular disease ...	9	235	58	244	8
	Aneurism	......	3	1	3	...
	Carried over	296	10,943	875	11,239	174

RETURN OF DISEASES AND DEATHS IN 1901.

	Diseases.	Remaining at end of 1900.	Yearly Total.		Total Cases Treated.	Remaining at end of 1901.
			Admissions.	Deaths.		
	Brought forward	296	10,943	875	11,239	174
Other Diseases	Arrythmia Cordis	1	11	......	12	
	Tachycardia	......	3	......	3	...
	Phlebitis	......	2	1	2	...
	Arterio-Sclerosis	......	9	......	9	...
	Varix	......	2	......	2	...
Local Diseases	Respiratory System	......	......	......	......	...
	Asthma	6	204	......	210	5
	Laryngitis	......	4	......	4	...
	Bronchitis	20	895	14	915	13
	Pneumonia	8	349	119	357	9
	Pleurisy	1	42	5	43	2
	Phthisis	......	......	......	......	...
Other Diseases	Emphysema Pulmonalis ...	......	3	......	3	...
	Haemoptysis	......	3	......	3	...
	Pulmonary Gangrene ...	......	1	......	1	...
	Pulmonary Apoplexy ...	......	1	1	1	...
Local Diseases	Digestive System	......	......	......	......	...
	Stomatitis	......	70	......	70	1
	Tonsillitis	2	38	1	40	...
	Gastritis	1	149	3	150	3
	Ulcus Ventriculi	......	......	......	......	...
	Enteritis	6	100	17	106	5
	Appendicitis	......	4	1	4	...
	Hernia	......	49	1	49	...
	Hœmorrhoids	4	112	......	116	2
	Fistula in Ano	......	41	......	41	2
	Hepatitis	1	65	8	66	3
	Cirrhosis of Liver	4	81	29	85	3
	Suppuration of Liver ...	1	24	10	25	1
	Biliary Calculus	......	4	1	4	...
	Peritonitis	......	25	13	25	...
	Diarrhœa	16	874	92	890	12
Other Diseases	Other Diseases	2	190	1	192	2
	Carried over	369	14,298	1,192	14,667	237

RETURN OF DISEASES AND DEATHS IN 1901.

Diseases.	Remaining at end of 1900.	Yearly Total.		Total Cases Treated.	Remaining at end of 1901.
		Admissions.	Deaths.		
Brought forward...	369	14,298	1,192	14,667	237
LOCAL DISEASES					
Lymphatic System...					
Splenitis	5	39	......	44	...
Hypertrophia Splenis...	4	507	8	511	4
Adenitis	6	135	......	141	5
Lymphangitis...	......	33	......	33	3
Lymphangiectasis	1	......	......	1	...
Urinary System					
Nephritis...	13	288	65	301	9
Pyelitis	1	......	......	1	...
Cystitis	1	75	2	76	4
Chyluria...	......	1	......	1	...
Calculus...	......	10	......	10	...
Other Diseases					
Hœmaturia...	1	26	......	27	...
Urinary Abscess	......	2	......	2	...
MALE ORGANS					
Generative System :—					
Stricture of Urethra	2	41	......	43	2
Prostatitis...	......	2	1	2	...
Phimosis	......	23	......	23	...
Paraphimosis	1	28	......	29	1
Ulcus Vener. Molle	1	91	......	92	1
Hydrocele...	1	72	......	73	2
Orchitis	1	78	......	79	1
Other Diseases					
Gangrene of Scrotum...	......	2	1	2	...
Balanitis	......	4	......	4	...
Acute Epididymitis	......	2	......	2	...
Varicocele	......	5	......	5	...
Hœmatocele	......	4	......	4	...
Carried over...	407	15,766	1,269	16,173	269

RETURN OF DISEASES AND DEATHS IN 1901.

		Diseases.	Remaining at end of 1900.	Yearly Total.		Total Cases Treated.	Remaining at end of 1901.
				Admission.	Deaths.		
		Brought forward... ...	407	15,766	1,269	16,173	269
LOCAL DISEASES	FEMALE ORGANS	Oöphoritis	......	1	......	1	...
		Parametritis	......	4	......	4	...
		Metritis	......	11	......	11	...
		Endometritis	......	5	......	5	...
		Displacements of Uterus ...	......	6	......	6	...
		Rupture of Uterus	......	......	......	......	...
		Vaginitis	......	18	......	18	...
		Amenorrhœa	1	4	......	5	...
		Menorrhagia	......	8	......	8	...
		Metrorrhagia	......	3	......	3	...
		Abortion	......	11	1	11	...
		Post partum Hæmorrhage ...	......	......	......	......	...
		Abscess of Breast	1	11	......	12	...
	Other Diseases	Parturition	1	70	1	71	...
		Pregnancy	1	30	......	31	2
		Salpingitis	......	1	......	1	...
		Vaginal Fistula	......	2	......	2	...
		Metroperitonitis	......	1	1	1	...
		Dysmenorrhea...	......	2	......	2	...
		Stricture of Vagina	......	1	......	1	...
		Organs of Locomotion :—					
		Osteitis	......	20	......	20	...
		Caries	......	7	......	7	...
		Necrosis	1	19	2	20	4
		Periostitis	......	3	......	3	...
		Synovitis	1	8	......	9	...
		Arthritis	1	50	......	51	1
		Ankylosis...	......	4	......	4	...
		Ganglion	......	......	......	......	...
		Cellular Tissue	......	......	......	......	...
		Cellulitis	5	198	2	203	8
		Gangrene	1	42	15	43	...
		Elephantiasis	......	23	1	23	...
		Abscess	4	202	......	206	13
		Carried over	424	16,531	1,292	16,955	297

RETURN OF DISEASES AND DEATHS IN 1901.

		Diseases.	Remaining at end of 1900.	Yearly Total.		Total cases treated.	Remaining at end of 1901.
				Admissions.	Deaths.		
		Brought forward...	424	16,531	1,292	16,955	297
LOCAL DISEASES		Diseases of the Skin :					
		Erythema	......	30	......	30	...
		Eczema	6	116	......	122	13
		Impetigo	3	117	......	120	1
		Psoriasis	2	6	......	8	...
		Herpes	1	5	......	6	...
		Zona	......	1	......	1	...
		Pemphigus	......	2	......	2	...
		Carbuncle	1	24	......	25	...
		Furunculus	2	42	......	44	3
		Paronychia	......	11	......	11	...
		Lupus	......	......	......	......	...
		Ulcus	13	304	2	317	9
	Other Diseases.	Ecthyma	......	34	......	34	3
		Lichen	......	5	......	5	...
		Keloid	......	1	......	1	...
		Prurigo	......	2	......	2	...
		Ainhum	......	1	......	1	...
		Onychia	......	1	......	1	...
		Injuries :—					
	General	Burns	3	16	4	19	1
		Lightning Stroke	......	......	......	......	...
		Asphyxia	......	......	......	......	...
	Othes injuries	Shock	......	4	2	4	...
		Rupture of Spleen	......	1	1	1	...
		Sunstroke & Cephalitis	......	2	......	2	...
LOCAL INJURIES		Burns & Scalds	......	32	5	32	2
		Bruise	2	270	......	272	...
		Wound	18	589	1	607	17
		Sprain	......	22	......	22	...
		Dislocation	......	12	......	12	...
		Fracture	4	98	4	102	9
		Gunshot Wound	1	11	......	12	1
		Malformations—					
		Head	......	......	......	......	...
		Thorax	......	......	......	......	...
		Abdomen	......	......	......	......	..
		Upper limb	......	1	......	1	...
		Lower limb	......	......	......	......	...
		Carried over...	480	18,291	1,311	18,771	356

RETURN OF DISEASES AND DEATHS IN 1901.

Diseases.	Remaining at end of 1900.	Yearly Total. Admissions.	Yearly Total. Deaths.	Total Cases Treated.	Remaining at end of 1901.
Brought Forward	480	18,291	1,311	18,771	356
Poisons—					
Mineral	......	3	2	3	...
Vegetable...	......	......	......	......	...
Animal	......	......	......	......	...
Parasites—					
Tape Worms	......	2	......	2	...
Round Worms	......	23	......	23	...
Thread Worms	......	6	......	6	...
Itch	1	213	......	214	4
Guinea Worms	......	1	......	1	...
Bilharzia Hæmatobia	......	3	......	3	...
Total	481	18,542	1,313	19,023	360
New born	1	27	......	28	1
Still-born	......	10	10	10	...
Premature Birth	......	5	5	5	...
Total	1	42	15	43	1

RETURN OF SURGICAL OPERATIONS IN 1901.

Diseases.	Remaining at end of 1900.	Yearly Total.		Total cases Treated.	Remaining at end of 1901.
		Admissions.	Deaths.		
OPERATIONS.					
Surgical Operations :—					
Removal of Tumors	......	11	......	......	...
Amputations	......	19	......	......	...
Excision	......	74	......	......	...
Operations on blood Vessels :					
„ of Eyes	......	49	......	......	...
„ of Nose	......	2	......	.. ...	...
„ of Ear	......	5	......	......	...
„ of Mouth	... ..	22	......	......	...
„ of Skull	......	2	......	......	...
„ of Chest	......	18	......	......	...
„ of Abdomen	......	22	......	......	...
„ of Liver	......	19	......	......	...
„ of Bladder	......	5	......	......	...
„ Urethra	......	60	......	......	...
„ of Rectum & Anus	......	11	......	......	...
Application of Forceps	......	10	......	......	...
Operations for Abscesses	......	70	......	......	...
„ for Hydroceles	......	10	......	......	...
Total	......	409	......	......	...
MENTAL DISEASES.					
NERVOUS SYSTEM. Section 3.					
Idiocy	8	5	1	13	2
Mania	205	94	22	299	209
Melancholia	10	12	4	22	10
Dementia	116	13	3	129	120
Delusional Insanity	56	......	......	56	48
General Paralysis	......	......	......	......	...
Total	395	124	30	519	389

Annexure A.

EXTRACTS.

CIVIL HOSPITAL.

Le nombre de malades admis à l'Hopital Civil pendant l'année 1901 s'élève au chiffre de 5,554, ainsi répartis :

Européens	241
Créoles	3,622
Indiens	1,691

Le nombre d'admissions s'élevant en 1900 à 5,124.

Sur ces 5,554 malades, 3,050 ont été déchargés entièrement guéris, 1,050 en voie de guérison, 145 grandement améliorés, 800 dans des conditions ne permettant pas de noter un changement notable, soit que ces malades, atteints d'affections chroniques, aient été transférés dans des hôpitaux de district ou dans des Asyles, soit qu'ils aient quitté l'hôpital, à leur propre demande, alors que leur état de santé n'avait subi aucun changement.

Le nombre de décès a été de 509, et, chose triste à dire, un tiers de ces décès est survenu peu d'heures après l'admission des malades, un tiers peu de jours après et le reste dans les conditions normales. Vous ne pouvez vous faire une idée du nombre de malades qui franchissent le seuil de l'Hôpital à ces heures tardives où tout secours médical est inutile. Ils sont légions les dysentériques et les tuberculeux qui viennent réclamer des soins alors que leurs intestins et leurs poumons présentent des lésions absolument incurables.

……

Il n'y a que deux moyens capables de diminuer la morbidité et la mortalité à Maurice ; il faut instruire le peuple, lui inculquer par tous les moyens possibles les notions d'hygiène et lui rendre agréable le séjour de l'hôpital. Il ne faut pas qu'il considère cet établissement comme le seuil du Cimetière. Et, à cette occasion, permettez moi de vous remercier, au nom des pauvres, de l'empressement avec lequel vous avez accueilli, en ce qui concerne l'Hôpital Civil, les suggestions que je vous ai faites en vue des améliorations a y apporter. D'année en année, l'hôpital Civil bénéficie de ces améliorations et je constate avec plaisir que l'aversion traditionnelle de la population créole pour l'hôpital, diminue sensiblement.

Je me permets de m'attacher à ces faits parce que si notre pays est classé à côté des pays les plus malsains du monde, c'est en raison de la fièvre paludéenne qui aux yeux de l'étranger, y exerce de terribles ravages.—Or, comme il arrive souvent, l'exagération ici colore la vérité et il convient de mettre les choses au point.

Il suffit de jeter un coup d'œil sur le nombre de cas de fièvre admis à l'hôpital—et il doit en être ainsi dans les autres hôpitaux—pour voir que la fièvre n'est pas si meurtrière qu'on le croit.

Sur 623 admissions, il n'y a eu que 9 décès. Prenez, par par contre, la tuberculose et la dysenterie, et vous verrez que sur 400 admissions pour tuberculose, il a eu 131 décès, et sur 208 dysentériques, 49 ont succombé.

Ce sont là les deux plus grands fléaux de la classse pauvre. Ce n'est pas à l'insalubrité du sol, mais à des maladies évitables qui deviennent inévitables par l'insouciance et l'ignorance qu'il faut attribuer la mortalité à Maurice. Joignez à la tuberculose l'alcoolisme qui y prédispose, la syphlis toujours traitée avec mépris et qui engendre des organismes à peine viables, les maladies des voies urinaires toujours graves parce que les malades les négligent dès leur début, et vous constaterez que ce n'est pas le paludisme qu'il faut surtout incriminer dans les statistiques de la mortalité.

La fièvre paludéenne est rarement grave à ses premières attaques ; il me semble même qu'elle s'est atténuée depuis quelques années et que les accès pernicieux, ictero-hémorrhagiques surtout, si fréquents autrefois, deviennent plus rares. En tous cas, ces accès hémoglobinuriques ne se rencontrent presque jamais chez le créole et surtout chez l'indien. Il y aurait là des recherches très intéressantes à faire.

Mais si la fièvre paludéenne ne tue pas, des ses premières atteintes, elle amène par des attaques répétées une anémie et une hypertrophie de la rate qui rendent infirmes ceux qui en sont atteints et sont une menace de mort chez eux qui ne consentent pas à changer de climat. De là, la nécessité pour moi, de créer des sanatoria sur les hauteurs de l'Ile pour les cachectiques paludéens et des réglements sévères qui les obligent à y séjourner tant que leur organisme n'aura pas recouvré son ancienne vigueur. Les autres maladies que nous avons eu l'occasion de traiter à l'hôpital sont des maladies accidentelles ou saisonnières sur lesquelles je ne vois pas la nécessité d'appeler votre attention. L'Influenza qui a sévi, comme d'habitude depuis quelques années, au début de l'hiver, n'a pas été aussi grave que les années précédentes. Elle n'a tué que ceux qui portaient les tares d'une affection rénale, pulmonaire ou cardiaque.

Je ne ferai que mentionner douze cas de rougeole très bénigne chez des immigrants nouvellement arrivés dans la colonie, deux cas mortels de méningite cerebro-spinale, toujours chez des Immigrants, qui nous ont permis de vérifier par l'autopsie et l'examen bactériologique le diagnostic porté pendant la vie. J'ai pris avec soin les observations de ces malades et les ai adressées à l'Inspecteur Médical.

……

J'espère, Monsieur, que vous serez fixé, cette année sur la destinée du nouvel Hôpital, et que, dans le cas où il sera décidé que les choses resteront ce qu'elles sont, vous voudrez bien accorder toute votre attention aux suggestions que je vous ai faites relativement aux modifications, réparations et autres aménagements à apporter à l'hôpital actuel. Comme, à votre demande, je vous ai adressé dernièrement une note détaillée à cet égard, je ne crois pas devoir y revenir.

……

Le laboratoire de bactériologie confié aux soins de M. Maya, pharmacien, continue à rendre de grands services, et ainsi que vous avez pu en juger par vous-même, il est tenu dans un ordre parfait. Les cultures du microbe d'Eberth, en permettant d'appliquer la réaction de Widal, au diagnostic des fièvres continues, nous ont permis, dans bien des cas douteux, de reconnaître la nature réelle de la fièvre à laquelle nous avions affaire. Et je tiens à ajouter que bien des médecins de la colonie n'ont pas hésité, dans de pareilles conditions à en appeler à nos recherches de laboratoire. L'examen du sang des paludiques nous a aussi permis de reconnaître quelquefois le type des fièvres paludéennes qui évoluaient devant nous.

……

F. ANTELME,

Medical Superintendent,
Civil Hospital.

3 Février 1902.

Annexure B.

FLACQ HOSPITAL.

Director,

I beg to submit to you my report on the Flacq Public Hospital for the year 1901.

1o. It will be seen from the accompanying return that the number of patients treated in the Flacq Public Hospital during the year 1901 amounted to 1451. Of these 1008 were males and 443 females, against 993 in 1900—721 males and 272 females.

2o. On the 31st. December 1901, the number remaining under treatment was 20, as compared with 43 at the close of 1900, and 33 at the end of 1899. The average stay of these in in hospital has been 21.2 days for the males and 8.4 days for the females.

3o. The daily average number of inmates under treatment in hospital was, for the males 37.8 and for the females 26.1 as compared with 39 and 16 in 1900, and 44 and 15 in 1899 respectively.

4o. The admissions during the year were 1408, 977 males and 431 females against 960 in 1900, 963 in 1899 and 1095 in 1898.

Of the admissions during 1901, 1356 were pauper patients, 47 belonged to the Police Force and 5 were private patients.

The following table shows the monthly distribution of the admissions for the last three years.

Months.	1899	1900	1901
January	62	72	83
February	72	86	96
March	86	99	173
April	106	100	147
May	122	98	136
June	99	96	108
July	85	75	137
August	53	60	148
September	72	57	89
October	75	85	129
November	71	73	75
December	60	59	87
Total... ...	963	960	1408

It will be observed that the highest number of admissions took place during the months of March and April, about two months or so after the highest rainfall, which occurred during the month of January.

The amount of rainfall during that month being nearly 19 inches.

The following table gives the monthly admissions for Fever and Dysentery during the last three years :—

Years.	1899.		1900.		1901.	
Months.	Fever.	Dysentery.	Fever.	Dysentery.	Fever.	Dysentery.
January	17	4	7	7	12	1
February	19	3	26	2	37	3
March	28	4	29	4	80	7
April	39	7	37	10	83	19
May	29	10	32	10	64	6
June	23	6	32	7	27	8
July	15	4	12	6	24	4
August	7	1	7	2	32	6
September	8	2	9	2	14	0
October	11	1	13	3	15	4
November	10	1	9	3	7	2
December	14	2	10	1	3	3
Total ...	220	45	223	57	408	53

The foregoing table shows that, for 1901, the highest number of admissions for fever and dysentery occurred during the month of March about two months after the heavy rainfall of January.

Fever, this year, was very prevalent throughout the Island, and it might be said to have assumed an epidemic form. Places that were generally considered free from it, suffered most from its effects, especially the comparatively healthy district of Moka where it raged with unabated violence during several months.

Influenza was also very rife during the year under review. It mostly assumed the neuralgic form, whilst last year the gastro intestinal one accompanied by head symptoms was most prevalent. Twelve or fourteen cases of this nature came under my notice last year both at Queen Victoria & Constance and La Gaieté Estates. They all terminated fatally and presented the following symptoms. The patient, who appeared to be enjoying good health, apart some malaise and a slight cough which had generally passed unnoticed, was suddenly seized with intense head ache. High fever—temperature ranging between 39.5 and 40.5. Pulse quick and bounding, vomiting, purging, wild delirium, loss of consciousness, coma and death which generally occurred within 48 to 50 hours after the first symptoms had made their appearance, and in some cases sooner.

The lesions revealed by the autopsy were a more or less intense congestion of the membranes of the brain and of the intestinal tube, some congestion about the lungs ; but not much. Nothing abnormal about the heart, liver, spleen or kidneys the bladder was, in all the cases, found greatly distended with urine. Nothing particular about the spinal cord.

During 1901, seven women were confined in this Establishment and the labour in six of them was natural and called for no interference, but in one of the cases, I had to resort to the application of forceps to draw the child out. This was the case of a woman sent here by the Manager of Deep River Estate upon the advice of the Medical attendant of the Estate.

Two cases of plague were admitted into this Establishment last year, one coming from Rose Hill and the other from Centre of Flacq village — one died and the other was transferred to the Lazaret.

More than forty cases of plague occurred in the District in 1901 and at the beginning of the present year.

The places where these took place were Rivière Sèche village, Belle Rose Hamlet, Centre of Flacq village, La Source Hamlet, Bon Accueil and Brisée Verdière Hamlets and Bon Accueil and La Retraite Estates.

……

The admissions for Phthisis during the year under review have been 36 against 34 in 1900; 26 in 1899; 34 in 1898 and 31 in 1897 and if the number of cases occurring in each of these five years be compared with the number of patients admitted in the same years, we find that the percentage of Phthisis to the number of admissions has been for 1897, 2.8 %; for 1898, 3 o/o; for 1899, 2.6 o/o; for 1900, 3.4 o/o, and for 1901, 2.4 o/o.

The discharges during the year amounted to 1,347 — males 949, and females 398. — Of these, 1,870 were discharged cured, 251 relieved and 26 not improved.

The percentage of the discharges to the total treated was 92.8 and when compared with the number admitted 95.6, whilst the proportion of those discharged cured to the number admitted was 79.4.

The average stay of those discharged has been for the males 14.7 days and for the females 17.9 days and the longest stay for which any one inmate has stayed in hospital was 347 days.

During 1901, 84 deaths were recorded, 68 males and 16 females as compared with 102 in 1900, 88 in 1899, and 130 in 1898. Of the 84 deaths registered in 1901, 14 occurred in the first quarter, 28 in the second, 27 in the third and 15 in the last quarter.

The ratio of the mortality to the total treated was 5.7 o/o and, when compared to the number admitted, 5.9 o/o. The average stay of those who died has been for the males 18. 4 days and for the females 9. 4 days.

……

There were 55 major and minor operations performed during the year under review and these consisted in evacuation of abscesses, Amputations, removals of tumours, operations for cataract — 6 operations for stricture of the urethra — Tapping of abdomen for ascites — One operation for abscess of Liver, 10 extractions of teeth and one application of forceps.

……

In the course of the year, the hospital was visited twice by the Director of the Medical and Health Department— And once by the Acting Assistant Sanitary Warden. On these three occasions, the hospital was found clean and tidy and the patients well cared for.

……

The additional female ward mentioned in my last report is now completed and has been in use since may last. — This ward has proved a great boon to this Establishment, by putting a stop to the dangerous overcrowding which before existed in the females department of this hospital, but unfortunately no drains have been constructed in connection with it to carry off the rain water and prevent it from permeating the ground in its vicinity.

……

S. A. R. MONTY,

Poor-Law Medical Officer,
Flacq.

Annexure C.

GRAND PORT HOSPITAL.

……

Malaria.—The year 1901 has been a bad one, we recorded an unusual amount of fever (malaria) in its various types from February to July—In February 1901, 38 cases of malarial fever were treated with one death. In March, the number of cases reached 120, and in April the cases rose to 146 with two deaths. There was an apparent decrease in May at the appearance of the cold season, the cases were 56 and no death.

The decrease was more evident during the month of June, when the number of cases fell to 29 and one death.

……

The attendances at the Hospital's Dispensary showed a large increase during February, March and April, reaching the following figures respectively 102, 198 and 258 then showing a slight tendency to fall in May to 151 cases.

The month of April appears to have been the worst of the year.

Dysentery.—104 cases were treated into the Hospital during 1901 with 17 deaths. The cases were frequent from February to August, the three worst months were March, 22 cases, 5 deaths, April, 20 cases, 3 deaths, May, 22 cases, 5 deaths.

The cases were generally very bad and patients were often admitted in great prostration.

Seventy seven cases were also treated at the Hospital Dispensary, the largest number 26, 13 and 10 were during the months of April, May and June.

……

Influenza.—The high rate of the cases of fever had hardly subsided that Influenza appeared and its spread was fully observed during August and September 1901. 83 cases, 3 deaths, 41 cases, no death respectively.

Pneumonia.—49 cases were treated during 1901 into the Hospital with 17 deaths, and 27 cases at the Hospital's Dispensary. The cases were more frequent in July and August, this is in part ascribed to the cold, windy, changeable weather we get at that time of the year.

Pulmonary Tuberculosis.—85 cases were admitted into Hospital during 1901 with 13 deaths, and 51 attended the Dispensary as outdoor patients. I believe that the decease is on the increase, and that the Indian labouring population is frequently attacked by the disease. It has also been observed that many patients have not the patience to undergo a prolonged treatment, and in some cases the result is a promptly fatal one. The largest number of cases was during August.

Nephritis. 22 cases of nephritis were admitted during 1901 with 4 deaths. The admission figures are monthly about the same for the whole year. I have to express my impression that I believe nephritis to have become a rather frequent affection and that irrespective of age, sex and population, the disease is met with oftener than years ago.

Mortality. The second and third quarters were those which had the greatest number of deaths, including the month of March.

There were 5 deaths from dysentery in March, 3 in April, 5 in May, one in June and one in July. Of the respiratory system, one death in March, 8 in April, 3 in May, one in June, 4 in July and 8 in August. Of fever, two in April, one in June and one in July. The remaining deaths were due to other causes.

From the above statement, it will be observed that the mortality increased from March to August, it fell to 4 for the month of September.

LOUIS PORTAL,

27 January 1902.
Government Medical Officer.
Grand Port.

Annexure D.

MOKA HOSPITAL.

La malaria est la maladie qui nous a donné le plus grand nombre de sujets, à l'hôpital de Moka. Du 1er Janvier au 1er Décembre ; 186 cas sous la forme aigüe, 15 cas sous la forme chronique : sur ce total, nous avons enregistré 3 décès.

……

Malgré les pluies torrentielles qui ont accompagné et suivi le cyclone du 13 Janvier c'est dans les mois de Février, Mars, Avril et Mai que nous avons eu le plus grand nombre d'admissions pour malaria : 28 cas en Février, 42 en Mars, 25 en Avril, 29 en Mai.

……

En dehors des accès de fièvre, dus à l'infection malariale, j'ai rencontré trois effets particuliers de l'infection par le sporazoaire de Laveran.

1o. Une ophthalmie très douloureuse qui n'a cédé qu'aux sels de quinine.

2o. Des diarrhées également qui ont cessé comme par enchantement à une forte injection de quinine additionnée d'un centigramme de morphine.

3o. Une congestion complète du poumon gauche, avec fièvre très forte, sans autres symptômes, que deux injections de bi-chlorydrate de quinine ont fait promptement disparaître.

……

Après la fièvre malariale, l'influenza est l'endémie qui nous a donné le plus de malades, — 94 cas en 11 mois.

……

La tuberculose pulmonaire se chiffre par 15 cas — dont 2 décès. Ce chiffre n'est pas élevé, mais je dois observer que les personnes atteintes de tuberculose pulmonaire viennent rarement à l'hôpital. La forme torpide étant la dominante, les malades restent chez eux, et redoutant de mourir à l'hôpital, aiment mieux finir chez eux.

Je n'ai cessé de répéter que les tuberculoses pulmonaires ne devraient jamais être traitées dans nos hôpitaux surtout en salle commune. C'est un danger pour les autres malades, en dépit de toutes les précautions que nous pouvons prendre. C'est une grande nocuité pour eux de ne pouvoir respirer un air pur.

……

Il me semble nécessaire, comme je l'ai toujours recommandé, d'instituer deux hôpitaux spéciaux — l'un pour la forme fébrile, l'autre pour la forme apyrétique.

……

La Maladie de Bright continue à nous donner le taux de mortalité le plus élevé — 7 décès sur 22 admissions pendant les 11 premiers mois de l'année.

Je n'ai eu cette année aucune néphrite albumineuse d'origine

syphilitique qui d'ailleurs est habituellement guérie par la medication spécifique.

……………………………………………………………………………

Dr. Eug. VINSON,
30 Décembre 1901.
Government Medical Officer,
Moka.

Annexure E.

LUNATIC ASYLUM.

I have the honour to submit the following Report on the health and sanitary condition of the Lunatic Asylum for the year 1901.

1. There were 395 lunatics remaining in this Institution at the end of 1900; including 242 males and 153 females. The daily average was 399.88 or 245.83 males, and females, 154.05.

2. The admissions during the year numbered 127 (81 males and 46 females) being an increase of 16 over those of 1900.

3. The greatest number of admissions were for Mania and Dementia—3 persons admitted on interim orders as lunatics were subsequently found not to be insane by the Commissioners in Lunacy and discharged.

Admissions in 1901.

Idiocy	5
Mania	94
Melancholia	12
Dementia	13
Delusional Insanity	...
Not insane	3
Total ...	127

4. The discharges in 1901 numbered 103 (69 males and 34 females) being an increase of 32 over those of the previous year. The proportion of discharges to Daily Average was 25.7 o/o.

The discharges were distributed as follows :

	Males.	Females.	Total.
Cured	9	1	10
Relieved	35	18	53
Not improved ...	25	15	40

among the first, are included the three patients found not to be insane by the Commissioners in Lunacy.

As in the case of admissions, the greatest number of discharges occurred among cases of Mania. The discharged indicated as not improved were merely transfers of harmless imbeciles from the Lunatic Asylum to the Barkly Asylum Lunatic Branch wards for the purpose of relieving the congestion of the former Institution.

5. There were 30 deaths at the Lunatic Asylum in 1901 or a percentage of 7.5 on the daily average and an increase of .8 o/o over the previous year.

They included 17 males and 13 females. The form of mental disorder from which they suffered were as follows.

Idiocy	1
Mania	22
Melancholia	4
Dementia	3
Total...	30

The causes of death were classified as follows ;

Epilepsy	2	Diarrhœa	3
*Malarial fever	2	Peritonitis	1
Senile gangrene	1	Phthisis	2
Mania	1	Chronic bronchitis	1
Debility	6	Cerebral congestion	2
Senile decay	1	Influenza	3
Lymphangitis	1	Paralysis	1
Dysentery	3		

Total ... ... 30.

The greatest number of deaths occurred, as can be seen in this table, from debility and senile decay.

11 of the patients who died were in a poor state of health on admission.

The ages at which the patients died are distributed as follows :

Ages.	Deaths.
20 — 30	5
30 — 40	8
40 — 50	5
50 — 60	8
60 — 70	4
Total...	30

6. There were 793 admissions into the Infirmaries during the year, 575 among the male and 218 among the female patients.

The daily average of sick in each hospital for the whole year was 35.26 for both sexes including 15.94 for males and 19.32 for females. The relatively greater daily average of sick among the females is due to the fact that there are several chronic cases of Paralysis kept always under treatment in the female Infirmary.

The admissions into Hospital were as follows for each month.

	Males.	Females.	Total.
January	52	13	65
February	54	20	74
March	88	38	126
April	79	21	100
May	33	13	46
June	26	16	42
July	42	41	83
August	75	12	87
September	27	11	38
October	31	13	44
November	37	13	50
December	31	7	38

Total ... ... 575 males — 218 females = 793.

---

* One for remittent fever.

The greatest number of admissions coincided, as can be seen in this table, with the two most unhealthy months of the year viz : March and April, and were due as shown in the next table mostly to admissions from Intermittent fever. An increased number of admissions again took place in the month of July and August, but this was due to a small epidemic of Influenza.

The table shows the monthly admissions from Intermittent fever, Dysentery, Diarrhœa and Lung affections.

	J	F	M	A	M	J	J	A	S	O	N	D	Total.
Intermittent Fever ...	36	47	94	46	24	13	24	5	8	8	3	4	312
Dysentery	1	...	...	1	2	...	1	2	1	2	4	2	16
Diarrhœa	2	4	7	15	3	...	6	...	4	4	6	2	53
Phthisis	...	...	...	2	2	...	...	...	...	1	...	...	5
Bronchitis	...	...	...	...	...	...	...	...	...	1	...	...	1
Inflenza	...	1	...	5	2	7	29	58	5	1	...	1	109

The admissions for malarial fever were much greater than in 1900 and in the five previous years, but the mortality was not high, 2 deaths only having occurred, one from Remittent fever.

Admissions from Intermittent fever into the Lunatic Asylum Infirmaries and deaths from 1896-1901 inclusive :

	Admissions.	Deaths.
1896	106	3
1897	175	1
1898	248	0
1899	146	1
1900	266	3
1901	312	2

The increased prevalence of fever in this Institution calls for certain measures of sanitation which it is desirable to carry out.

With a view to the destruction of the anopheles mosquitoes and the protection of the patients from their bites, I have recommended the collection of all waste water of this establishment in covered tanks to be utilized for gardening purposes instead of the present system of open pools, and providing the windows of the Infirmaries and some of the dormitories with wire gauze netting.*

I append notes of an interesting case which was considered to be one of plague by the Sanitary Authorities, but as it presented certain features which rendered the diagnosis most difficult, and I believe still uncertain, it may be of sufficient interest to show how almost impossible it is to come to a definite conclusion in certain cases.

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* Notes not printed.

I may add that three was no case of plague in the Establishment before and that none has occurred since.

The township of Beau Bassin has been contaminated with plague for some time past and of late a few dead rats (one found to contain plague bacilli) have been found in the Superintendent's quarters outside the Lunatic Compound but none have been observed within the precincts of the Asylum.

(S.) J. I. PADDLE, M.D.
Medical Superintendent,
Lunatic Asylum.

Annexure F.

PORT LOUIS CENTRAL PRISON.

Observations on the sanitary condition of the Prison of Port Louis and on the prevalence of sickness in the different seasons of the year.

1. Judging from the following table which gives the daily number of sick in hospital per 1000 of average strength, for the last five years, the sanitary state of this Prison shows in 1901 no improvement over the preceding years.

Table I.

Year.	Daily Number of sick in hospital per mille of strength.
1897	60.1
1898	78.1
1899	124.3
1900	110.3
1901	119.8

2. As I have already pointed out in previous reports, the Prison cannot *per se* be held responsible for this high rate of sickness which is largely due to the fact that many prisoners are received in the establishment in a diseased condition, necessitating immediate hospital treatment. As many as 10 per cent of men sent to prison in 1901 had on arrival to be admitted to hospital, as against 6.1 per cent in 1899 and 6.2 per cent in 1900. Moreover, out of a total of 1266 hospital admissions for the year, no fewer than 655 consisted of newly convicted or remanded prisoners.

In other words 51.7 per cent (or little more than the half) of the hospital cases were imported from outside, the corresponding proportions for 1899 and 1900 being respectively 40.2 per cent and 37 per cent. This year, therefore, the extrinsic element was accountable to a still greater extent than usual for the high sick rate of this prison.

3. The following table shows at a glance the diseases thus introduced into Prison as contrasted with those that originated in the establishment itself.

Diseases.	Cases detected on admission into Prison.	Cases occurring in the course of improvement.	Total.
Malaria	80	301	381
Dysentery—			
(a) Acute...	24	46	70
(b) Chronic	7	2	9
Ancemia	43	1	44
Debility	38	2	40
Influenza	34	36	70
Leprosy	3	...	3
Gonorrhea	18	...	18
Syphilis	16	...	16
Diseases of Respiratory System—			
(a) Asthma	10	12	22
(b) Bronchitis	95	55	150
(c) Pneumonia	3	...	3
(d) Pulmonary Tuberculosis ...	11	6	17
Diseases of Digestive System ...	34	94	128
Diseases of Lymphatic System—			
(a) Hypertrophy of Spleen ...	64	...	64
(b) Other diseases	6	3	9
Diseases of the Skin	76	23	99
Diseases of the Urinary System ...	2	...	2
Diseases of the Generative System ...	16	2	18
Local Injuries...	19	4	23
Parasitic diseases	22	2	24
Other Diseases	34	22	56
Total	655	611	1,266

Note.—All the above returns refer only to cases admitted during the year and do not include those remaining at the end of 1900 which numbered 15—viz:

Malaria—	
Quotidian	1
Tertian...	1
Type undiagnosed	1
Debility	2
Functional cardiac disorder (Arrhythmia...	1
Bronchitis	3
Pulmonary Tuberculosis	3
Diarrhœa	1
Paraphimosis	1
Local Injury	1
	15

The total number of patients treated during the year was therefore 1,281.

It results from the above figures that the imported ailments were *Anœmia, Debility, Hypertrophy of Spleen, Leprosy, Chronic Dysentery, Venereal affections* and *Parasitic diseases.* The majority of *skin* and *respiratory diseases* were likewise introduced by new comers. The prevailing diseases of this Prison were in reality *Malaria, Acute Dysentery, Influenza, Digestive disorders* and to some extent *Bronchitis.*

The following table is a general comparative statement of sickness and mortality for the last three years.

TABLE III.

	1899	1900	1901
Daily average population of the Prison	233.1	235.85	244.24
Total number of admissions to Hospital	1119	1033	1266
Daily average number of admissions to Hospital	3.06	2.77	3.46
Ratio per mille of daily admission to average population	13.1	11.7	14.1
Number of Deaths	11	10	5
Death-rate per mille of average population	47.1	42.2	20.4

This table shows a sensible increase in the sickness over the two preceding years, but a considerable reduction in the death rate, so much so indeed, that, if the sanitary condition of a place were to depend solely on the mortality, that of the Central Prison of Port Louis in 1901, would be, to my knowledge, the best ever recorded.

5. Table IV gives the prevalence of sickness and the relative mortality in the different seasons of year.

TABLE IV.

	First Quarter.	Second Quarter.	Third Quarter.	Fourth Quarter.
Daily average population of the Prison	242.21	278.40	239.57	217.11
Number of admissions to Hospital.	315	399	332	220
Daily average number of admissions to Hospital	3.5	4.3	3.6	2.4
Ratio per mille of daily admissions to average population ...	14.4	15.4	15.02	11.04
Number of Deaths.	—	2	2	1
Death rate per mille of average population	—	7.1	8.3	4.6

According to this table, the worst quarters as regards sickness and mortality were the 2nd. and 3rd., which correspond to the winter season. There was no death in the first quarter and the sick rate in the 4th. quarter was comparatively low.

6. Table V gives the comparative prevalence of the chief diseases in the four quarters of the year for the last three years.

TABLE V.

Quarters.	Total number of patients admitted.			Malaria.			Respiratory diseases.			Diseases of Digestive system.			Dysentery.			Anœmia.			Debility.			Influenza.		
	1899	1900	1901	1899	1900	1901	1899	1900	1901	1899	1900	1901	1899	1900	1901	1899	1900	1901	1899	1900	1901	1899	1900	1901
First ...	261	276	315	102	80	127	37	34	25	41	26	34	17	12	9	8	8	14	1	11	11	...	...	...
Second ..	369	304	399	147	96	125	53	68	71	30	29	38	22	20	41	18	10	11	14	4	14	34	14	6
Third ...	253	258	332	39	33	87	60	68	61	34	44	28	10	29	19	22	5	8	15	8	8	1	...	52
Fourth ..	236	195	220	57	27	42	36	46	35	31	34	28	12	15	10	15	6	11	14	3	7	...	...	12
Total ...	1119	1033	1266	345	236	381	186	216	192	136	133	128	61	76	79	63	29	44	44	26	40	35	14	70

Malaria prevailed as usual in the first two quarters Diseases of the Respiratory system occurred chiefly during the winter season which comprises the 2nd. and 3rd. quarters. Dysentery predominated in the 2nd. quarter but other gastro intestinal complaints were met with almost uniformly throughout the year. Influenza provailed this year to a much greater extent than the preceding years. Three fourths of the cases belonged to the third quarter.

Remarks on particular diseases that have occurred during the year. Their general character as to mildners or severity,

7. *Malaria.* Malaria is the chief prevailing disease of this Prison, accounting in 1901 for 30 per cent of the hospital cases, as against 31 per cent in 1899 and 20 per cent in 1900. The Establishment itself was this year, either partly or entirely, responsible for no fewer than 300 out of a total of 381 cases, a clear proof that the locality is by no means free from the malarial germ and its propagating agent, the mosquito. Moreover, I have instances on record in which prisoners admitted for quite a different complaint were, in the course of their stay in hospital, suddenly seized with typical malarial attacks, to all appearances the result of local infection.

However, Mosquitoes, though certainly present on the Prison premises, are not abundant and those of the genus Anopheles in particular. are so few as to readily escape detection. The place does not seem to afford conditions favourable to the breeding and development of those insects. The soil is kept as dry as possible, the open drains are always clean and in good working order and the water in the large tanks used for washing and bathing purposes is frequently renewed. Besides, chronic enlargement of the spleen and other manifestations of Malarial cachexia are not to be met with among the inmates of the Port Louis jail, even among long sentenced ones, in the course of their imprisonment. Cases of this nature that come under my care are invariably imported by new comers. This tends to show that prisoners in town are not exposed to slow and constant malarial infection.

The following table which gives the number of malarial cases for the last three years, classified according to their clinical types, shows in 1901 a marked increase in the prevalence of malaria as compared with the preceding year.

TABLE VI.

Clinical Types.	Cases.			Deaths.		
	1899	1900	1901	1899	1900	1901
Intermittent ...	...	...	...	...	...	...
Quotidian ...	181	61	110	...	...	...
Tertian ...	14	11	15	...	...	...
Quartan ...	11	2	1	...	...	...
Irregular ...	6	8	11	...	...	...
Type not diagnosed.	121	142	233	...	...	...
Remittent	10	12	11	...	1	2
Pernicious	2	...	...	1	...	...
	345	236	381	1	1	2
Daily average strength	233.1	235.8	244.24	...	...	...

The majority of the cases, viz 206 out of a total of 384

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could not not be ascribed to any of the known types as they were characterised by single attacks of not more than 24 hours' duration without recurrence, owing, no doubt, to the cyclical evolution of the parasite having been readily checked by the quinine treatment. In a few instances (28) the type could not be determined because the patients happened to fall ill on the eve of the expiry of their sentence and their stay in hospital was too short to allow of a diagnosis being made. In the quotidian cases, the fits were as usual mild and seldom more than two or three in number. The tertian cases were, with but few exceptions, likewise benign. There was only one case belonging to the quartan type. Two of the eleven remittent cases proved fatal. In the first of these, the patient, a newly admitted prisoner of about 60 years of age, already labouring under chronic bronchitis and general debility, was carried off by adynamic symptoms. For the other fatal case, the fever was at first of the intermittent type but from the 4th day, it became more severe and assumed the remittent character. The patient died of cardiac failure on the tenth day.

The means employed in my hospital practice for reducing the temperature consist in the administration of phenacetin, coupled with digitalis, caffeine or strychnine, the inunction of creosote (in the proportion of 30 m to oz. i., of olive oil) and, in cases of hyperpyrexia, wet packing and cold baths. In intermittent cases, quinine is administered as a rule, during the stage of perspiration, in the intervals between the attacks and for three or four days after the last attack. In cases of remittent fever of a persistent nature, the acid chlorhydrate of Quinine which is very soluble in water, is given subcutaneously in 7 grain doses, repeated every 6 hours. This mode of treatment is indeed invaluable in such cases. With proper antiseptic precautions, abscesses are usually avoided. Still in a few exceptional cases, abscesses would occur in spite of ordinary precautions. This is the only drawback to the hypodermic administration of quinine, a drawback which forcibly limits its use to severe cases. I may say, *en passant* that I have never seen a single case of tetanus resulting from subcutaneous injections of Quinine, although this medication has been a favourite one with me for many years past.

Hœmoglobinurie fever, or Blackwater fever as it is commonly designated, is entirely unknown in this Prison. I have never met with a single case there in my long practice which extends over twelve years. My experience of Blackwater, whatever be its cause, is that in this Colony, Indians and Black Creoles, who constitute nearly the whole jail population enjoy a sort of racial Immunity from this disease, the usual victims of which are either of mixed blood or belong to the white population. I have no doubt my colleagues, engaged in hospital or private practice will corroborate my statement. Dr. Antelme, the Medical Superintendent of the Civil Hospital where the great majority of the patients are Indians and Creoles, informs me that only two cases came under his notice in the course of the last six years. If my observation be correct, the fact that those very creoles and Indians pay their tribute to the same extent as the other inhabitants of the Island to our common foe, Malaria, and that enormously enlarged spleens are of common occurrence among them, Indians specially, would *prima facie* tend to show that the Malarial parasite is not a factor, at any rate not the chief factor, in the œtiology of hœmuglobinuric fever. It is moreover interesting to note, from the standpoint of the Quinine poisoning theory, that malarious patients in this

Prisons hospital frequently take from 20 to 30 grains of Quinine in the 24 hours for several days without inconvenience.

8. *Plague.* The epidemic of Plague which raged in a rather severe form during the last six months of the year spared the Prison of Port Louis, as it did on the two preceding years. Not a single case occurred among the male population. This is remarkable, when it is remembered that 6525 male prisoners coming from all parts of the Island, many from the dirtiest slums of the place, entered this Prison in 1901. That no one was admitted in the Incubation stage of the disease was, I need hardly say, only a happy coincidence for which the Institution deserves no praise. Our efforts however, tended towards the prevention of contamination by clothes and our aim was achieved by the complete disinfection of all articles of dress of every prisoner on admission. On the other hand, the construction of the Prison buildings which are built entirely of stone and concrete and are deprived of double wooden partitions, cellars and garrets, renders it unsuitable for habitation by rats. A few mice manage to secrete themselves in the Pharmacy and in the carpenters shed, but I am informed by the Chief warder that no rats, dead or alive, are to be found on the Prison premises.

The only case of Plague that came under my notice in 1901 was that of a female prisoner who developed the disease on the day following her admission into Prison (vide special report concerning female prisoners).

9. *Dysentery.* There were in 1901, 79 cases of dysentery of which 48 originated in the Prison and 31 were imported by newly admitted prisoners.

Comparative statement of Dysentery cases for the last three years.

Table VII.

	Cases.			Deaths.		
	1899	1900	1901	1899	1900	1901
Dysentery—Acute...	55	74	70	1	...	...
Chronic	6	2	9	3	1	...
Total... ...	61	76	79	4	1	...

The saline treatment of Dysentery continues to hold its own remarkably well in my hospital practice. The death rate from that disease was nil in 1901. This mode of treatment was inaugurated by me in May 1898 and since that time the mortality from Dysentery has been reduced to a minimum in the Prison of Port Louis although many of the cases are not seen from the beginning.

The following table which shows the result of the Saline treatment as compared with the Ipecac : treatment will give an idea of the value of the former.

Table VIII.

Ipecac : Treatment.			Saline Treatment.		
	Cases	Deaths		Cases	Deaths
1895	37	2	1898 (May to		
1896	66	2	Dec.	56	...
1897	62	4	1899	55	1
1898 (Jan. to May)	41	3	1900	74	...
			1901	70	...
Total ...	206	11		255	1

But apart from the medical treatment, I cannot attach too much importance to the dieting which should consist essentially of a milk diet. To enforce such a diet on prisoners is a matter of the greatest difficulty, as it is impossible to make men of this category understand its necessity. They would in spite of representations and constant vigilance eat on the sly such noxious articles as chutny and curry, the consequence being invariably dangerous relapses, to prevent which I am frequently compelled to keep the patients locked up in the hospital cells.

10. *Influenza.* As already stated, there was a considerable increase in the prevalence of Influenza in 1901 as compared with the two preceding years. This was I believe general throughout the island. Most of the cases ran a mild course and were rapidly cured. A few cases however assumed a serious character. Two of these ended fatally. One was characterized by Broncho pneumonia, hyperpyrexia, and meningitis. The other fatal case was that of an old man of 62, already labouring under senile debility. Intestinal complication set in and he died of asthenia.

11. *Diseases of the Respiratory system.* Comparative statement for the last three years.

Table IX.

Return of diseases.	Cases.			Deaths.		
	1899	1900	1901	1899	1900	1901
Acute laryngitis ...	1	2	...	...	...	...
Asthma	35	29	22	...	...	...
Bronchitis	...	...	...	...	...	...
(a) acute ...	115	151	138	...	...	...
(b) chronic ...	14	12	12	...	...	...
Pneumonia... ...	11	8	3	2	1	1
Gangrene of the Lung	1	...	...	1	...	...
Pleurisy	1	...	...	1	...	...
Pulmonary Tuberculosis	8	14	17	1	3	...
	186	216	192	5	4	1

Bronchitis as usual prevailed chiefly during the winter season, but this prison was this year responsible for only one third of the cases (vide Table II). There were only three cases of Pneumonia, all imported with one death. The fatal case was one of apical pneumonia with cerebral complication. Seventeen cases of Pulmonary Tuberculosis came under treatment this year, viz:

(*a*) 13 cases introduced by newly admitted prisoners.
(*b*) 2 cases transferred from Beau Bassin to Town on the eve of being discharged from prison.
(*c*) 2 cases in which the disease was contracted or developed in the Prison of Port Louis.

Of the 13 prisoners who entered prison in a tuberculous state, 3 were released on pardon, 7 spent the whole of their sentence, which was in each case a short one in hospital, three were transferred to Beau Bassin, where since my last report arrangements have been made for the separate location of such cases.

Of the two last mentioned prisoners (*c*) both of whom were long sentenced men, one was released on pardon and the other was transferred to Beau Bassin.

12. *Diseases of the Digestive System.* Comparative statement of diseases of the digestive system for the last 3 years.

Table X.

Return of Diseases.	No. of cases.			Deaths.		
	1899.	1900.	1901.	1899.	1900.	1901.
Stomatitis	70	34	18	...	...	...
Tonsillitis	5	9	13	...	...	...
Dyspepsia	1	13	7	...	...	...
Gastritis	2	3	2	...	...	...
Diarrhœa	45	46	58	...	...	...
Piles	3	5	6	...	...	...
Other diseases ...	10	23	24	...	...	...
	136	133	128	...	...	...

The diseases of the digestive system most commonly to be met with in this prison are Stomatitis and Diarrhœa— Stomatitis is now nearly so common as it used to be in former years when, in my opinion, the complaint was due to the prolonged use of salt fish not always of the best quality. The change which was effected at the beginning of the year under review in the quality and preparation of this article of diet has been followed by excellent results. The Bombly fish is now no longer issued and the fish is served as a chutney with aubergines or as a "rougaille" with "pommes d'amour." The consequence has been a considerable reduction in the number of both hospital and outdoor cases, as can be seen from the following comparative statement:

Table XI.

	Number of cases.		
	1899	1900	1901
Hospital cases ...	70.	34.	18
Outdoor cases... ...	142.	94.	27.
Total... ...	212	128	45

Diarrhœa except when associated with debility is usually here a mild complaint which readily yields to treatment and change of diet.

13. *Skin diseases.* The majority of the cases were found among newly admitted prisoners. They consisted chiefly of the following: Ecthyma, Eczema, Carbuncle, Furoncles and Ulcers of all descriptions.

14. *Parasitic diseases.* These were Itch of which there were no fewer than 139 out-door and 21 hospital cases and Bilharzia hœmatobia of which there were 3 cases. All the cases of scabies with only one or two exceptions were brought in by new comers. The out-door cases are kept in a separate yard. In my experience the pure sulphur ointment is not half so good as when carbonate Potash is added to it. Even the worst cases are rapidly cured by the latter combination.

15. *Insanity.* There were two cases of Insanity in 1901. Both patients were admitted into Prison with mild symtoms of mania which necessitated their transfer to the Lunatic Asylum. Only one of them was kept in hospital pending the transfer.

16. *Leprosy.* Nine Lepers, nearly all picked up as vagrants in the streets, were received in this Prison in 1901. Only 3 required hospital treatment. They were all transferred to St. Lazarre Asylum. In the majority of the cases, the disease was of the anæsthetic type.

17. *Accidents.* Seven prisoners met with accidents while at work. In no case were the injuries sustained of a serious nature.

18. *Operations.* In addition to a number of minor ward operations such as circumcision, incision of abscess, tapping for hydrocele etc., three operations were made under chloroform viz. 2 for fistulæ in ano and one for necrosis of the lower jaw. Owing to deficient accommodation in this Prison hospital, patients needing serious surgical interference have to be sent to the Civil Hospital where a special ward proclaimed as part of the Prison has been opened up for that purpose.

19. There were only 5 deaths during the year for a total of 1,281 patients treated. The hospital death rate was the lowest ever obtained to my knowledge.

Table XII.

Year.	Hospital death rate
1894	10.2 per thousand patients.
1895	29 „
1896	27 „
1897	12 „
1898	14.8 „
1899	9.8 „
1900	9.5 „
1901	3.8 „

20. As can be seen from Table III, the death rate of the male population of the Port Louis Prison was this year very low indeed, viz. 20.4 per thousand. The death rate for the whole population of the Prison including female prisoners was 23.2 per thousand, as there was one death among female prisoners.

Comparative death.rate for the last three years.

TABLE XIII.

	Average Prison Population.			No. of Deaths.			Death rate.		
	1899	1900	1901	1899	1900	1901	1899	1900	1901
Male	233.15	235.85	242.21	11	10	5	47.1	42.2	20.4
Female	17.93	12.42	15.81	0	0	1	0	0	63.2
Whole Population ...	251.08	248.27	258.02	11	10	6	47.1	42.2	23.2

21. Table IV gives the relative mortality of the 4 quarters of the year. There was no death in the first quarter. The mortality of the other three quarters was respectively 5.01, 6.02 and 4.5 per thousand of the average strength.

22, Statement showing the mortality from the prevailing diseases as compared with the two preceding years.

TABLE XIV.

Diseases.	Cases.			Deaths.			Mortality per centum of cases.		
	1899	1900	1901	1899	1900	1901	1899	1900	1901
Malaria	345	236	384	1	1	2	·24	·42	·52
Dysentery	61	76	79	4	1	...	6·5	1·24	...
Influenza	35	14	70	...	1	2	...	7·1	2·8
Diseases of the Respiratory System	186	221	198	5	4	1	2·6	2·4	·52
Diseases of the Digestive System	140	134	129	...	...	...	...	...	...

N. B.—This table which gives the number of patients treated includes those remaining at the end of 1900.

23. Tabular statement of causes of death showing the number of fatal cases among newly admitted prisoners.

TABLE XV.

	Cases.			Deaths.		
	Newly admitted prisoners.	Prisoners under-going sentence.	Total.	Newly admitted prisoners.	Prisoners under-going sentence.	Total.
Malaria (Remittent)	2	9	11	1	1	2
Influenza	34	36	70	1	1	2
Pneumonia... ...	3	...	3	1	...	1
	Total			3	2	

The above table shows that imported cases account no fewer than three out of a total of five deaths — and that only two prisoners died of diseases contracted in Prison.

General statement concerning newly admitted prisoners.

6,525 prisoners were admitted into Prison in 1901.

655 prisoners (or 10 per cent of the above) had to be sent to Hospital on admission into Prison.

3 of these died of diseases thus imported.

Observations on the faulty sanitary condition of the Hospital.

24. In conclusion, I wish to call again the attention of Government to the faulty sanitary condition of this Prison Hospital and the unfitness of the place, with its structural defects, for its present use. As I have already reported, Light and Ventilation so indispensable in institutions of this nature, are here defective in spite of punkahs and glass ventilators. In summer, the air of the ward is close and anything but comfortable. Its temperature often reaches 92° and even 93°.

……

The flat bitumen roof leaks considerably whenever it rains and the dampness thus created in the ward is, I need hardly say, not conducive to health. Attempts have been repeatedly made to remedy this state of things, but the permeable condition of the roof seems to be beyond repair. There is no bath room. The water closets open into the hospital through intervening cells and although they are as much as possible shut off from it by spring doors and although carbolic acid and lime are freely used, the bad smell occasionally finds its way into the ward. In such a place are kept together in the sickly seasons as many as 55 or even 60 patients (the average daily number for the whole year being 29.1) not counting men under observations and hospital servants. It stands to reason that cases treated under such unfavourable conditions are not likely to progress satisfactorily and it cannot but be a matter of surprise to any one that worse results are not obtained.

F. A. ROUGET,
M.B., C.M., Edin.,
Police and Prison Surgeon.

7th. February, 1902.

From Additional Medical Inspector to the Director, Medical and Health Department.

Director,

I have the honour to forward herewith my yearly report as Sanitary Warden in charge of Port Louis for 1901.

John BOLTON,
Additional Medical Inspector.

24th. March 1902.

REPORT.

Preliminary. As I was not the Sanitary Authority for the District and City of Port Louis for the first nine months of last year, I am not in a position to present as complete a report upon the Sanitary condition during 1901 as I should have desired.

Division of Port Louis. The city of Port Louis is divided into eight sections which are in charge of eight Sanitary Inspectors assisted by one Sanitary Guard each. Some of the sections comprise outlying localities which should not form part of the city proper. Viz : Vallée des Prêtres, Rochebois, Ste Croix, Grand River, &c. the limits of Port Louis for sanitary purposes should not extend beyond the old french fortification on the east and west end Police Station on the opposite side.

Inspections. During the year under review the Inspectors paid 21,436 visits to private premises ; 451 to Common Lodging Houses ; 2,204 to shops ; 960 to cowsheds and 1,010 to the Public Latrines—besides other work.

Contraventions detected. The principal contraventions detected were : 3,939 in connection with defective drains, water tanks, water pipes, &c. 1,184 relate to defective privies, insufficient latrine service and apparatus.

Nuisances abated. Of the 3,939 nuisances detected, 3,704 were abated, and 235 were in abeyance on the 31st. of December ; 343 persons were prosecuted for non compliance with notices served upon them, 339 were convicted—the fines amounted in all to Rs. 1,251.25.

Prosecutions fines. For contravening the night soil service Regulations, 224 persons were prosecuted and 210 were fined a total of Rs. 779.50.

Street nuisances. Defective "regards" and defective water pipes in the streets were the causes of 627 nuisances which had to be reported to the Municipality for abatement. Of these, 562 were attended to and 65 remained in abeyance on the 31st. of December.

Night Soil Service. The contractors for the night soil service and their servants were prosecuted 190 times for breach of the Regulations and fined Rs 752.50.

Other duties. Besides the above duties the Inspectors were called upon to perform duty in quarantine afloat or at the two stations for 215 days, an average of 31 days each. Again, since the reappearance of plague each Inspector has had to remain in office three hours daily to meet emergencies so that, with Sundays, Public Holidays and time spent in Court prosecuting cases added to the above, the time remaining to be devoted to pure Sanitary work was considerably curtailed.

Sanitary works.

The Sanitary works undertaken by the Public Works Department at the request of the Medical and Health Department were :

3450 feet of new gutters (open drains)
21559 „ of old gutters reconstructed.
18166 „ of old gutters repaired.

The total cost of the above was Rs. 31817.06.

In addition to the above, the open drain representing the upper part of Creoles Stream was repaired from Enniskillen Street down to Mère Barthélemy street, at a cost of Rs. 5,300 From this spot the drain was continued as far as d'Orléans street at a further cost of Rs. 4,339.

A very serious nuisance, of old standing, at the mouth of this stream near the railway bridge, was partly abated in 1901—an area of 9,600 square feet had to be completely paved over; it was completed in February this year.

The sewage of the city of Port Louis is removed in open gutters running on each side of the streets, some empty themselves directly in the harbour, others into the streams of the Town which thus become large filthy open sewers emitting foul odours from the numerous stagnant pools along their course.

Only a small portion af the city has the privilege of an underground system of drainage, and that is part III of Mr. Chadwick's scheme for the drainage of the Town. The householders are gradually recognising the avantages of the system. In 1900 only 62 houses had completed their connections with the mains; in 1901, 101 were added to the list, so that at the end of the year, 163 houses had their sewage removed by the underground channel.

The pumping station at Caudan works during eight hours daily and the volume of sewage removed averages 206,000 gallons daily.

Water Supply.

The water supply of the City is still derived from that objectionable source, Grand River N. W. and nothing has as yet been attempted by the Municipal Corporation for the purification of the water before its distribution to the inhabitants.

Public Health.

The health of the City of Port Louis was far from satisfactory in 1901. The death rate was 72.2. All the deaths were medically certified. Either by the Medical Practitioners who had attended the patient or by one of the Medical Officers of the Department.

Causes of death.

The principal causes of death were : Malarial fever and its sequelæ for 22.6 o/o, Plague for 16.1 o/o ; Tuberculosis 11.4 o/o and Intestinal diseases, including dysentery, diarrhœa, enteritis 6.8 o/o. Influenza caused nearly 3 o/o of the deaths.

Prevalence of disease.

The above diseases prevailed at different periods of the year ; thus, malaria increased considerably in the second quarter of the year after the heavy rains of the latter end of the first quarter, luxuriant vegetation and the advent of the mosquito season. Plague reappeared in the beginning of the third quarter after having remained latent for about three months—69 persons died from the disease in the 3rd and 466 in the last quarter of the year.—Influenza also made its reappearance in the third quarter and caused 104 deaths. Concurrently with this disease Pneumonia prevailed, carrying off 85 persons in the period against 37 and 49 in the two previous quarters.

Disease death rate.

The total number of deaths registered in Port Louis in

1901 was 3,613 and the death rate was equal to 72.2 per 1000 per annum. Malarial fever and its sequelae were responsible for a death rate equal to 15.9 per 1000 p. a. Plague for one of 11.3; Intestinal diseases 4.8. Pneumonia 4.3. Tuberculosis 8. Bronchitis 3. Influenza 2.

The following table shows the prevalence of some of the most important diseases during the past three years — it is instructive in showing the progress of these.

Comparative Statement of Causes of Death in Port Louis and Death rate per mille of total population.

	1899	1900	1901
Population.	52,517	53,978	51,387
Causes of Death.			
Malaria and Sequelae	786	603	818
Death rate %	15.	11.17	15.9
Intestinal diseases	227	163	248
Death rate	4.3	3.02	4.8
Bronchitis	178	212	152
Death rate	3.4	3.9	3.
Pneumonia	184	264	224
Death rate	3.5	5.	4.3
Plague	733	293	583
Death rate	14.	5.4	11.3
Tuberculosis	332	358	411
Death rate	6.3	6.6	8.
Influenza	53	20	103
Death rate	1	.3	2
Other diseases	1,028	920	1,018
Death rate	19.5	17.1	19.75

Control of Causes of Death.

The system of having all deaths reported to the Medical and Health Department has led to great improvement in the classification of the causes of death in Port Louis. In cases where no Medical Certificate is forthcoming the dead body is examined by one of the Medical Officers of the Department who issues the necessary certificate and the death is then registered at the Civil Status Office. So that the causes of death borne on the above statement are near enough for Statistical purposes. It will be seen that the number of deaths from Malaria varies from year to year being high in one year, low the next and high again the following; the same remarks apply to all the diseases borne on the statement except Tuberculosis which shows a slow progressive rise. The number of deaths from this cause having been 332, 358 and 411 for the years 1899, 1900 and 1901 respectively. I do not think this can be explained on the score of better classification alone, in as much as the same progressive tendency is not observed with the other diseases mentioned. On the other hand to the prevalence of Influenza in 1901 must be attributed a certain number of the deaths from Tuberculosis, many insipient cases having undoubtedly been hurried to a fatal termination by previous attacks of Pneumonia following Influenza.

Since the outbreak of Plague in 1899 the attention of the

Sanitary Authorities has been more specially directed towards insanitary dwellings and premises than previously. A considerable number have in consequence been improved and made fitter for human habitation. This has not always been easy as in many instances, the owners have been unable to incur the heavy outlay which any change in the original faulty construction of the building entailed ; the work has in such cases to be done by instalments, hence considerable delay : or else the premises are closed until full satisfaction has been given to the Sanitary Authorities.

In this connection I may mention that, as a general rule the poorer classes occupy rooms in what are here called " Common Lodging Houses," which are under a dual control. Under the Municipal Corporation with regard to registration, and under the Medical and Health Department for Sanitary matters.

It is much to be regretted that the Corporation does not seem at all eager to take steps for the enforcement of the Law. In 1899, 78 Common Lodging Houses were registered at the Municipality and declared to the Sanitary Authorities. In 1901 only 17 were declared.

It is true, that the definition of a Common Lodging House in Ord. No. 18 of 1896 is so faulty that it leaves the door open to fraud. I have already reported upon this question.

The result of the action taken by the Sanitary Authorities has been the gradual steady thinning out of the population of these hitherto over crowded tenements.

Sanitary Band.

The Sanitary Band were employed during the year in cleaning and maintaining the trenches and open unpaved drains in the suburbs the total length undertaken was 54980 feet.

On four occasions they had to collect sea weeds at Caudan over the total area of 171700 square feet, over four acres, dig large pits in the sand and bury them.

Twenty four and a half acres of waste land was cleared of cactus and undergrowth in different parts of the Town.

The Streams of Port Louis were cleaned and their banks weeded over a length of 7,500 feet; and Latanier river on a length of 900 feet below the leper Asylum.

The underground drains were flushed or swept as circumstances permitted.

The privies of all Government Establishments, the Public Latrines and Urinals were cleaned, disinfected by the Sanitary Band.

Disinfecting Stations.

The machinery of the Disinfecting Station at Plaine Lauzun had to be several times repaired owing to the great strain brought to bear on it by the outbreak of Plague.

The new plant for the Harbour disinfecting station was received this year. It is of English make and appears of very good workmanship.

Food.

The steady rise in the price of food stuffs and meat during the past two years may not be without influence in the high death-rate which has been registered.

Rice, which in ordinary times could be had for Rs 9 per bag of 75 kilos, was sold at Rs 12. The poorer classes were forced to use an inferior quality.

Beef, which, as long as the supply of bullocks from Madagascar was regular and amply sufficient for local requirements was retailed at 25 cents per pound, rapidly rose to 75 cents when the supply from Madagascar failed.

Mauritius bullocks being all required for draught purposes, the butchers had the only alternative, of killing cows and calves.

The quantity of meat of all kinds, viz : Beef, veal, goat's flesh, mutton and pork removed from the Public Slaughter-house of Port Louis and sold to the inhabitants of Port Louis has steadily decreased as the following return will show.

Year	Beef	Cow's flesh	Goat's flesh	Mutton	Pork	Veal	Total
	Kilos	Kilos	Kilos	Kilos	Kilos	Kilos	Kilos
1898	560,682	267,575	24,673	1,494	135,660	102,825	1,092,909
1899	559,062	283,850	22,231	1,476	124,185	86,925	1,078,729
1900	369,036	177,450	28,545	1,746	135,762	133,650	846,189
1901	140,454	228,725	38,632	3,024	154,530	132,150	697,515

The average per head of the population of the town for the last three years has been therefore 20 k. 5 for 1899, 15.8 for 1900 and 13.5 for 1901 per annum.

A powerful firm of English Merchants have just completed an Establishment for the storage of frozen meat. It is admirably fitted upon the most approved modern principles. It will soon be filled with the best meat the world can supply, so that everybody will be able to enjoy a piece of decent beef and mutton.

Consumption of alcohol.

If the quantity of meat has considerably decreased the amount of alcohol consumed has been steadily increasing.

The following statement speaks for itself.

Colonial and Spirits and Wines imported and issued for Comsumption

Year.	Spirits.	Consumption per head.	Wines.	Consumption per head.
	Litres.	Litres.	Litres.	Litres.
1898	890,260	2.4	1,834,749	4.8
1899	1,071,319	2.8	1,974,656	5.2
1900	1,106,187	2.8	2,241,189	6.
1901	1,144.916	3.07	1,552,646	4.2

If the consumption of wines fell off in 1901 as compared with the three previous years the same cannot be said of spirits.

It is well established now, that abnormal consumption of spirits is accompanied by increase in Crime, Lunacy, Suicide &c. and a diminution in the number of births.

Whether the above remarks apply to the first three in Mauritius, I am not prepared to say, with regard to the latter however the figures for the year under review are eloquent enough. The deaths exceeded the births in the Island by 2061.

Sickness in Port Louis.

The following returns show the prevalence of certain diseases at certain periods in the city of Port Louis. I have not included Plague, as very few cases of this disease were observed at the Dispensaries and also because Dr. Barbeau the Plague Authority deals specially with the Outbreak of this disease.

These returns show the attendance at the three Public Dispensaries of the Town.

Diseases treated at the Eastern Dispensary in 1901.

Diseases.	1st. Quarter.	2nd. Quarter.	3rd. Quarter.	4th. Quarter.
Malarial fever & Sequelæ.	742	1,235	659	298
Influenza	......	......	75	6
Pulmonary diseases ...	187	408	503	197
Intestinal do. ...	56	92	135	108
Other do. ...	694	675	618	387
Total... ...	1,679	2,410	1,992	698

Diseases treated at the Central Dispensary in 1901.

Diseases.	1st. Quarter.	2nd. Quarter.	3rd. Quarter.	4th. Quarter.
Malarial fever & Sequelæ.	314	477	250	119
Influenza...	13	10	220	38
Pulmonary diseases ...	116	222	231	116
Intestinal do. ...	52	56	28	18
Other do. ...	320	338	330	397
Total... ...	819	1,103	1,059	697

Diseases treated at the Western Dispensary in 1901.

Diseases.	1st. Quarter.	2nd. Quarter.	3rd. Quarter.	4th. Quarter.
Malarial fever & Sequelæ.	457	804	316	364
Influenza...	16	15	250	56
Pulmonary diseases ...	118	401	253	146
Intestinal do. ...	34	53	20	22
Other do. ...	325	400	301	306
Total... ...	950	1,659	1,140	897

John BOLTON,
Additional Medical Inspector.

STATEMENT OF WORKS PERFORMED BY SANITARY INSPECTORS IN 1901.

No. of premises visited.	No. of contraventions detected.	No. of Notices served.	No. of Nuisances abated.	No. of Nuisances in abeyance on 31.12.01.	No. of Public Nuisances reported.	No. of Public Nuisances abated.	Prosecutions.	Fines.	Cremations.	Visits to Shops.	Visits to Common Lodging Houses.	No. of Cow sheds visited.
21,436	5,123	3,939	3,704	235	627	562	757	Rs. 2,783.25	4	2,204	451	960
No. visits to stables.	No. of visits to Public Latrines.	No. of visits to Government Establishments.	Visits to Cemeteries.	Visits to Tanneries.	Visits to Inodore Establishment.	Inspections of Aloe factory.	Exhumations.	Visits to Bakeries.	Visits to Lime Kilns.	Lighters inspected.		
600	1,010	867	61	27	38	10	7	156	37	653		

John BOLTON,
Add. Medical Inspector.

THE ACTING ASSISTANT SANITARY WARDEN TO THE DIRECTOR, MEDICAL AND HEALTH DEPARTMENT.

Sir,

The country districts having been, during various periods of last year, under the supervision of different sanitary wardens, it has been settled between the Medical Officers of this office that Dr. Bolton would undertake the Annual Report for Port Louis and that I would take up the one for the country districts.

I therefore beg to submit this report in connection with your circular No. 31 of 1901.

Early last year an attempt had been made to collect information on the lines pointed out in the circular and to report on the various places after a personal visit to each ; such however had to be given up owing to Plague Work requiring the presence of all the Wardens in town. In view of this report, however, information has been obtained from the Sanitary Inspectors ; it is not complete and is supplied more in the shape of averages but it is sufficient to allow of comparison to a certain extent. It is unfortunate that comparison with previous years cannot be made through there existing no similar records.

Plaine Wilhems has not been considered here ; the district having been under the care of local wardens during the whole year, they are placed in a better position to report on its sanitary condition.

Sugar Estates are not specially entered into either as they are fully dealt with in the Medical Inspector's report thereon.

The Sanitary conditions of the districts under consideration, as far as Plague is concerned, has not been the object of special study. This question will be more extensively exposed in the exhaustive report which is being prepared by the Plague Authority, Dr. Barbeau.

The conditions relating to superficial drainage, water supply overcrowding &c., are given in the Annexures Series A. It will be noticed that superficial drainage, as a whole, is fairly satisfactory. No recommendation as to what should be done with a view to better the present condition of things can be made here, the defects must be studied and dealt with as necessity arises.

The water supply being mainly directly from rivers and from wells, cannot be said to be in general of pure quality owing to the numerous known sources and possibilities of pollution.

The conditions of habitation, as far as overcrowding is concerned may be said to be good, for in few instances only does the average number of inmates per house exceed six ; among the latter are to be noticed the different villages and hamlets of Black River district, then Moka, St. Pierre, Pailles, Mount Ory, Poudre d'Or and Grand Bay.

The study of the prevalence of disease, of its character and lethality, is not an easy task, on account of the errors which the elements of information at our disposal carry with them e. g. the erroneous declarations of deaths ; such has however been attempted in the Annexures series B. where the deaths declared at the Civil Status have been tabulated under the headings indicated for the four quarters of the year.

Annexures series C. are returns from Public Hospitals and Dispensaries.

On consideration of these, it appears that Malarial Fever was specially prevalent in all districts during the second quarter of the year. Annexure D. shows the deaths reported from fever, worked up into average per 100 of total deaths and per 1000 of total population for each quarter of the year ; consideration of the latter averages shows that fever was most prevalent in Black River which is followed by Pamplemousses, Flacq, Grand Port, Savanne, Rivière du Rempart and Moka.

As far as Lung diseases are concerned, Rivière du Rempart, Grand Port and Savanne lead with an average of 1.9 per 1000 of the total population, followed by Black River, Pamplemousses, Moka and Flacq with 1.5, 1.2, 1.1, and 0.9 per 1000 of the total population. The highest averages were obtained during the third quarter of the year for Flacq, Rivière du Rempart, Grand Port and Black River whereas Pamplemousses, Moka and Savanne showed their highest averages in the fourth, first and second quarters respectively.

Influenza, according to deaths registered under that heading, prevailed during the third quarter; Black River and Pamplemousses leading with 1.4 and 1.2 per 1000 of the total population; Moka, Rivière du Rempart, Flacq, Grand Port and Savanne following with 0.8, 0.5, 0.4, 0.4, and 0.1 per 1,000 of the total population respectively.

The several districts under consideration show their highest averages for alimentary diseases during the second quarter of the year except Black River whose highest average falls during the first quarter. The progressive sequence of the averages is 2.1, 2.0, 1.4, 1.3, 1.1, 0.9 and 0.8 per 1,000 of the total population for Savanne, Rivière du Rempart, Grand Port, Moka, Pamplemousses, Flacq and Black River respectively.

The highest averages for fever and alimentary diseases during the second quarter follow pretty closely the highest amount of rainfall; the effect which this latter has in fostering the main causes of fever and alimentary diseases, viz: the mosquito and an impure supply of drinking water need hardly be dwelt upon here.

Annexure E. shows in a tabulated form the cases of contagious diseases — Plague excluded — registered at this Office from notifications by medical practitioners. As will be easily understood this is not a true picture of the occurrence of such diseases as many cases escape diagnosis through not being seen by medical men.

Annexure F. is the usual annual return of Contraventions against Sanitary Regulations, of the Sanitary Work performed by the Officers and of the various details about Abattoir, Market and Cemetery Work. Out of 2,069 notices served, 1,911 were complied with; the figures for the preceding year were 1,244 notices served and 1,179 complied with.

Annexure G. is a description of the Sanitary Works undertaken during the year under consideration; with the exception of the erection of a new public latrine at Trou d'Eau Douce landing station, they mainly consist of repairs effected for the abatement of nuisances.

Before bringing this report to a conclusion, I would mention that the Scavengering and Night Soil Services have on the whole been satisfactorily performed by the various Contractors. It is desirable that these services be extended to more localities than at present. It will be somewhat difficult to effect this in connection with the Night Soil service because private services i. e. services on private premises which are of great help to Contractors in submitting low tenders will not be available in certain hamlets which though populous are inhabited by poor people. Scavengering Services would, however, be more easily established for I believe that it would be possible to come to agreements, for small sums of money, with Sugar Estates in the vicinity of the hamlets for the periodical performance of scavengering services therein. The establishment of such scavengering services and of night soil services when possible in the larger hamlets and populous places, indian villages for instance is what I would recommend in closing this report.

F. J. R. MOMPLÉ,
Acting Assistant Sanitary Warden.

20th. March 1902.

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13 MAY 1974
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